### DEPARTMENT OF THE ARMY HEADQUARTERS, WALTER REED ARMY MEDICAL CENTER 6900 Georgia Avenue, NW Washington, DC 20307-5001

PI-1 Nursing Policy

21 July 2005

### **Nursing Peer Review for Reportable Conduct**

- **1. PURPOSE**. This policy provides guidelines for a nursing peer review process and development of an ad hoc nursing peer review committee. The committee will review/evaluate conduct of a licensed nurse for actions that are reportable to a regulatory agency and make recommendations to the Deputy Commander, Nursing (DCN) for further action.
- **2. SCOPE**. This policy applies to all licensed nursing personnel delivering care to patients at Walter Reed Army Medical Center (WRAMC). This policy excludes peer review of impaired providers (see WRAMC Pam 40-3), peer review conducted for level of practice advancement, annual performance review, and ongoing peer review through established clinic/unit mechanisms. Prevention of and attention to violations of standards of practice benefit and/or maintain the protection of the public. All individually privileged nurses (i.e., NP, CNS, CRNA) will be reviewed through the medical staff functions of the WRAMC credentials office.

#### 3. REFERENCES.

- a. AR 40-68, Quality Assurance Administration, 1989
- b. DOD Directive 6025.14, Reportable Conduct, 1990
- c. WRAMC Pam 40-3, Provider Health Program, 1 May 2005
- d. American Nurses Association, Scope and Standards of Practice, 2004.

### 4. DEFINITIONS.

- a. Peer Review is the evaluation of nursing services to include qualifications of nurses, quality of patient care rendered by nurses, merits of complaints concerning nurses and nursing care, and determinations or recommendations regarding nursing practice of specific licensed nursing providers.
- b. Nurse, as used in this policy, refers to registered nurses (RN), licensed vocational nurses (LVN), and licensed practical nurses (LPN).
  - c. Reportable conduct occurs when a nurse:

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- (1) Exposes or is likely to expose a patient or other person unnecessarily to a risk of harm.
- (2) Engages in unprofessional conduct.
- (3) Fails to adequately care for a patient.
- (4) Fails to conform to the minimum standards of acceptable nursing practice.

#### 5. RESPONSIBILITY.

- a. All nurses are expected to be familiar with the nursing peer review process.
- b. Individual Responsibility: Each licensed nurse who believes a nurse may have engaged in reportable conduct is required to report this conduct to the DCN through their appropriate Head Nurse, and/or Section Chief.
- c. First-line Supervisor Responsibilities: First-line Supervisors will report a nurse, through appropriate channels, to the DCN.
- d. DCN Responsibility: The DCN will review all accounts of reportable conduct in a timely manner and refer issues to the Nursing Peer Review Committee when appropriate.
- e. Nursing Peer Review Committee Responsibility: If the Nursing Ad Hoc Peer Review Committee determines that a nurse engaged in reportable conduct, the Committee will submit a report to the DCN with recommendation(s) for action(s) to be taken.
- f. Institutional Report: The DCN is responsible for submitting a report to MEDCOM when Nursing Peer Review at WRAMC recommends substantive disciplinary action be taken against the licensure status of a licensed nurse. MEDCOM will report to the State Board of Nursing where the individual is licensed as appropriate.

#### 6. CONFIDENTIALITY OF NURSING PEER REVIEW.

- a. The nursing peer review proceedings are confidential. It is important that peer review committee members maintain confidentiality at all times. A peer review committee member violating confidentiality acts in bad faith and could risk losing immunity from liability.
- b. The confidentiality requirements apply to all attending the nursing peer review proceedings.
- c. The information is not subject to court subpoena and may not be used in a professional liability lawsuit, IAW AR 40-68.

- d. The nursing peer review committee can disclose information, on a need-to-know basis only, to WRAMC regulating authorities, e.g., Hospital Performance Improvement, Risk Management, Credentials Committees and MEDCOM.
- e. The Nursing Peer Review Committee may disclose information to another nursing peer review committee, provided the Judge Advocate General authorizes that disclosure. The Committee receiving the information is not authorized to re-disclose that information.
- f. Violation of these confidentiality provisions can result in potential civil liability for the person breaching confidentiality. These guidelines are designed to help participants avoid inadvertent confidentiality breaches.

#### 7. PROCEDURE.

- a. An Ad Hoc Nursing Peer Review Committee (hereafter referred to as Committee) will be established by the DCN when needed. The purpose of this committee is to review reportable conduct referred by DCN and to make recommendations to the DCN regarding further action(s). The Committee will review reported incidents in which a nurse may have engaged in reportable conduct as outlined in definitions, paragraph 4c.
- b. The membership of the Committee will include an RN chairperson and an RN or LPN from each Clinical Section (i.e., Medical/ Psychiatric, Surgical, Pediatric, Critical Care, Perioperative, and Ambulatory Nursing). The DCN will appoint the chairperson and members when it is determined that a reportable incident will be peer reviewed. The members should be employed/assigned to WRAMC for at least one year prior to appointment. When considering RN reportable conduct, all voting members will be RNs. When considering LPN reportable conduct, at least two voting members will be LPN/LVNs. The DCN will appoint Committee membership to ensure at least one nurse member has a working familiarity in the same area of nursing practiced by the nurse being reviewed at the time of the incident.
- c. A quorum of at least five members must be present to conduct Committee business. Although every effort should be made to achieve consensus among Committee members when decisions are needed, majority rule will be used. The Chairperson will vote only in case of a tie.
- d. Minimum procedural standards during peer review that guarantee due process to the nurse under review are:
  - (1) Right to notice (notification in a timely manner to allow for action or response).
  - (2) Right to be informed of underlying basis for allegations(s).
  - (3) Fair hearing before an impartial panel.
  - (4) Opportunity to present evidence and witnesses.

- (5) Opportunity to refute evidence presented.
- e. The Committee will use a procedural due process checklist to ensure the nurse under review is afforded due process throughout the proceedings (Appendix 1).

#### 8. PEER REVIEW COMMITTEE OPERATION.

- a. Reports consisting of a description of the incident, reasons the reporting person believes the conduct of an individual nurse provider is reportable, and any subsequent action taken by the reporter will be submitted in writing (dated and signed) to the DCN (Appendix 2). These reports may be generated by an individual nurse within the organization or by any supervisor in the reported nurse's chain of supervision. Reports are submitted directly to the DCN or through the supervisory chain.
- b. The DCN will confer with the Chairperson of the Nursing Peer Review Committee within five (5) working days regarding the content of the report(s) and will decide whether the alleged reportable conduct warrants peer review by the full Committee. Once peer review by the Committee is directed by the DCN, the Chairperson has five (5) working days to notify the nurse provider named in the report(s). See attached reporting forms (Appendix 3).
- c. Confidentiality of the person reporting the behavior to the nurse whose conduct is reported is maintained. The reporting nurse is expected to sign The Individual Report (Appendix 2). The name of the person making the report will be removed before the report is submitted to the Committee.
- d. The Committee will investigate the report. The Committee will have access to all witnesses and documents pertinent to the investigation and will usually interview the nurse whose conduct has been reported. This interview may be conducted by several members of the Committee or by the entire Committee. Attendance will be limited to the nurse and Committee members. Nurses may consult with the collective bargaining unit if appropriate. Neither the Committee nor the nurse being interviewed will have legal counsel present during the interview. Legal counsel may be available in an adjacent location and consulted when necessary.
- e. The evaluation required by the Committee should be completed within 15 working days, but not more than 30 calendar days will elapse from the date of notice given to the person being evaluated.
- f. A written report of the findings will be forwarded to the nurse being evaluated within five (5) working days following conclusion of the Committee's decisions (Appendix 4).
- g. If the Committee report indicates a finding that reportable conduct occurred, the nurse may submit a rebuttal to be appended to the report. The rebuttal must be received by the Committee within five (5) working days of receipt of the Committee findings (Appendix 5).

- h. A final report consisting of a description of the incident and conduct, findings and conclusions of the Committee, rebuttal statement and a recommendation regarding disciplinary action shall be forwarded to the DCN within 10 days following the conclusion of the Committee meetings (Appendix 6). The Chair of the Committee is responsible for preparing the report.
- i. The administrative officer will keep a record of procedural due process given to the nurse being reviewed and keep the Chairperson informed of designated time lines/deadlines. An administrative officer, a non-voting member of the Committee, will be selected by the DCN. The administrative officer will maintain and keep all worksheets/tools used in this process in a secure/locked location (Appendix 7).
- j. The recommendation of the Committee will be communicated by the DCN to MEDCOM as necessary.
- k. When it is suspected that the nurse's practice is impaired by chemical dependency or mental illness, a referral will be made to the Chairperson of the Provider Health Program at WRAMC for further evaluation and action.
- I. The proceedings, documents, and reports of the Committee are confidential and will not be released to any parties except as specified in this policy. Patient names will not appear in any written material or reports.
- m. The peer review process and Committee activities are an integral part of the Performance Improvement Program and the facility's Performance Improvement Program. All reviews, reports, and recommendations may not be released except to MEDCOM. Any request for committee reports, files, and/or records must be coordinated through the Center Judge Advocate Office.

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JOAN P. EITZEN
COL, AN
Deputy Commander for Nursing

Appendix 1 – Procedural Due Process Checklist

Appendix 2 – Individual Report of Nurse Conduct to the Peer Review Committee

Appendix 3 – Notice of Report Receipt

Appendix 4 – Detailed Summary of Peer Review Committee Findings

Appendix 5 – Rebuttal Statement

Appendix 6 – Nursing Peer Review Committee Final Report

Appendix 7 – Case Activity Sheet

Appendix 8 – Confidentiality Guidelines for Participants in Nursing Peer Review Process

Appendix 9 - Time Line for Peer Review Committee Operation

### APPENDIX 1 WALTER REED ARMY MEDICAL CENTER NURSING PEER REVIEW COMMITTEE

### PROCEDURAL DUE PROCESS CHECKLIST

WRAMC NPOL PI-1 (Nursing Peer Review for Reportable Conduct) defines what constitutes minimum due process which must be afforded to the nurse being reviewed. Steps should be taken to ensure the nurse is afforded due process since failure to do so could result in the Committee being found to have acted in bad faith and lose its immunity from liability. The following is a checklist to verify that all the requirements of due process have been met.

1. Not more than 30 calendar days from date of incident (insert date), the nurse was given written notice that included:
Date of notice Notice that his/her practice was being evaluated Date of Committee meeting at which nurse conduct will be reviewed Description of the event(s) to be evaluated in sufficient detail to inform the nurse of the incident, circumstances and conduct (error or omission) Date(s) times, locations and individuals involved in the incident Patient's identified by initials or numbers Name, address, telephone # of contact person to receive nurse's response
2. The nurse was given a copy of the peer review plan, policies and procedures (with the written notice).
3. The nurse was informed of his/her right to appear before the Committee.
4. At least 15 calendar days before the Committee meeting, the nurse was provided adequate opportunity in person or by attorney to review documents concerning the event under review.
5. The composition of the Committee and voting rights meet the requirements of WRAMC Nursing Policy.
6. The Committee included at least one nurse who had a working familiarity with the area of nursing practice in which the nurse being reviewed practices. In the event it was not feasible to include such a nurse, the reason was documented.

### PROCEDURAL DUE PROCESS CHECKLIST (continued)

7. Nurse was given opportunity to appear before the committee and:  make a verbal statement  ask questions and respond to questions of the Committee  provide a written statement regarding the event under review
8. The nurse was informed that he/she is entitled to an attorney and that attorney would be entitled to "parity of participation" with facility's attorney ("parity of participation" means the nurse's attorney could participate to same extent and level as the facility's attorney, e.g., if the facility's attorney can question witnesses, so can nurse's attorney).
9. The matter was resolved no more than fifteen working days from the Committee meeting stated in the notice of hearing.
10. The nurse was given written notice of the findings of the Committee.
11. The nurse was given five (5) working days to provide written rebuttal statement to the Committee's findings.
12. The nurse's rebuttal statement was included as part of the Committee findings.
13. Procedures for maintaining confidentiality were followed as described: Name of reporting person not provided to person with reported conduct. Name of reporting person expected to be on original Individual Report to Peer Review Committee (via Head Nurse/Section Chief/DCN)
Committee does not receive name of reporting person.

## APPENDIX 2 WALTER REED ARMY MEDICAL CENTER NURSING PEER REVIEW COMMITTEE

Individual Report of Nurse Conduct to the Peer Review Committee

1. This report is completed on:			
Name of Nurse Rank/Title Unit/Position			
Conduct being reported: (Briefly provide a factor Avoid accusations or subjective conclusions. Ider not include patient's name. Attach a continuation Date/Time Unit/Location	ntify patients by hospital number. Do sheet, if necessary.)		
Reportable Conduct: Exposes or is likely to expose a patient or harm Engages in unprofessional conduct Fails to adequately care for a patient Fails to conform to the minimum standard			
Description:			
3. Witness: (Identify other persons who have info	rmation about the incident/conduct)		
I swear that the information provided is true to the Printed Name, Rank/Title	e best of my knowledge.		
Signature/Date			
***Upon completion, forward this report through F to the Deputy Commander of Nursing.	lead Nurse/Section Nursing Supervisor		
	FOR COMMITTEE USE ONLY		
	Date Received:		
	Date Received: Case ID Assigned:		

TO:

## APPENDIX 3 WALTER REED ARMY MEDICAL CENTER NURSING PEER REVIEW COMMITTEE

Notice of Report Receipt

	OM: Chair, Nursing Peer Review Committee  BJECT: Assessment of Practice by Peer Review DATE:
1.	This memo acts as your notice that the Nursing Peer Review Committee has received a report (based on the incident or conduct described below) and is evaluating your practice.
2.	The peer review process is one of fact finding, analysis and study of events by licensed nurses in a climate of collegial problem solving focused on obtaining all relevant information about an event. However, if the Committee's evaluation results in an adverse finding against you, it will result in the Committee reporting you to the appropriate regulatory authority. The Committee does not make a decision of what, if any, disciplinary action should be taken. Appropriate administrative personnel make that decision.
3.	You have certain rights in this process including the right to review documents, the right to appear before the committee, the right to submit a written statement and the right to submit a rebuttal statement if any adverse finding is made by the Committee. These rights are more fully described in NPOL PI-1.
4.	When appropriate, you will be contacted by a representative of the Committee for your account of the incident. If you have any questions, feel free to contact me at or(phone number).
5.	Description of Incident/Conduct: (Attach copy of original Individual Report of Nurse Conduct)
6.	The Committee will meet:  Date and Time:(Not more than 30 days from date of notice.)
	Location:  NPOL PI-1 requires that the incident be described in sufficient detail to inform the nurse of the incident, circumstances and conduct (error or omission) and should include date(s), time(s), location(s), and individual(s) involved. Initials or number shall identify patient/client.)
	Signature: Chairperson, Nursing Peer Review Committee

## APPENDIX 4 WALTER REED ARMY MEDICAL CENTER NURSING PEER REVIEW COMMITTEE

**Detailed Summary of Peer Review Committee Findings** Date: 1. Nurse's Name License # Case ID 2. Incident/Conduct Summary: Attach copy of original Individual Report of Nurse Conduct 3. Summary of Evidence and Findings: (State in detail. Do not use witness names. Use additional sheets as necessary.) 4. Determination of Committee - Reportable Incident The Committee determined (check as appropriate): \_\_a) The nurse did engage in reportable conduct. Evidence is sufficient to find that: the nurse exposed a patient or other person to risk of harm the nurse is likely to expose a patient or other person unnecessarily to risk of harm because of: \_\_\_\_ unprofessional conduct \_\_\_\_ failure to adequately care for the patient failure to conform to minimum standards of acceptable nursing care b) The nurse did not engage in reportable conduct 5. Corrective Action Recommended: 6. Disciplinary Action: The Committee's findings, recommendations, and determination may or may not result in disciplinary action. The decision as to disciplinary action will be made in accordance with local policy and administrative decision. The Committee will convey its findings to the Deputy Commander for Nursing.

ADDDOVED BY THE COMMITTEE CHAID.

Detailed Summary of Peer Review Committee Findings (Continued)

- 7. State Board Action: The Committee's action does not constitute action by any State Board. What action or investigation, if any, the Board takes against your license will be determined in accordance with the Nurse Practice Act and the Rules and Regulations of that State Board. The Committee's findings will be reported to the WRAMC Deputy Commander for Nursing.
- 8. Rebuttal Statement: You may, if you desire, submit a reply or rebuttal to this statement. Your statement will be attached to the Committee's report and forwarded with it. Your statement must be submitted to the Chair, Nursing Peer Review Committee NLT five (5) working days after receipt of this statement. To protect patient confidentiality, please do not use patient names or other identifying information.
- 9. If you have any questions about this statement, please contact the Committee Chair.

APPROVED BY THE COMMITTEE CHAIR:		
Signature	Date	
ACKNOWLEDGEMENT OF RECEIPT BY NURSE:		
Signature	Date	

### APPENDIX 5 WALTER REED ARMY MEDICAL CENTER NURSING PEER REVIEW COMMITTEE

### REBUTTAL STATEMENT Instructions

- Nursing Policy and Procedure PI-1 states your right to submit a rebuttal statement to the Detailed Summary of Findings that the Peer Review Committee provided you. Your statement will be made a permanent part of the findings and included with the Committee's report.
- 2. The rebuttal statement must be typed and must not exceed 1500 words. The Committee may delete that portion of the statement in excess of 1500 words.
- 3. The statement may not include patient names or other patient identifying information. Any such information will be deleted from the statement.
- may result in the information being disclosed without the rebuttal statement.

  Date: \_\_\_\_\_ Case ID: \_\_\_\_\_

  Name: \_\_\_\_\_ License

4. Be sure to comply with any deadline for submitting the statement. Failure to do so

Rebuttal statement: (Do not use patient name or other patient identifying information. This typed statement may not exceed 1500 words. Use additional sheet, if necessary.)

## APPENDIX 6 WALTER REED ARMY MEDICAL CENTER NURSING PEER REVIEW COMMITTEE

Nursing Peer Review Committee Final Report

1. Nurse Being Reported: (Please provide following information about nurse being reported. If unknown, state "unknown".
Name: License #/State:
Employer:
Home Address:
2. <u>Incident/Conduct Being Reported</u> : Attach copy of original Individual Report of Nurse Conduct
3. Committee Action
Is a copy of the required Committee's Detailed Summary Report enclosed? YesNo
Committee Findings: Exposed patient or other to risk of harm Failed to adequately care for patient Engaged in unprofessional conduct Failed to meet minimum standards
4. Did the nurse submit a rebuttal statement? YesNo
5. Is a copy of the rebuttal statement enclosed? YesNo (Required)
6. Has corrective action for nurse been taken or recommended? YesNo If Yes, describe:
7. Does Committee recommend disciplinary action against the nurse? YesNo If Yes, explain why:
I affirm that the information provided is true to the best of my knowledge.
Signature: Date: Date:

# APPENDIX 7 WALTER REED ARMY MEDICAL CENTER NURSING PEER REVIEW COMMITTEE Case Activity Sheet

1. Date opened:		
2. How initiated:		
3. Date nurse notified practice being ev	valuated:	
4. Initial investigation (within days o	of report):	
5. Date Initiated:	Date Completed:	
6. Summary of Evaluations:		
7. Summary of Results:		
8. First meeting of Committee (within	days of report):Date:	
Member:	RN/LPN:	Other:
Position:	Unit:	
Member:	RN/LPN:	Other:
Position:	Unit:	
Member:	RN/LPN:	Other:
Position:	Unit:	
9. Summary of Statements:		
10. Documents Reviewed:	Date:	
11. Findings:		

12. Recommendations:			
13. Further investigation (If necessary, within days of committee meeting.)			
Summary of investigation:			
Summary of Results:			
14. Second Committee Meeting:		Date:	
Member:	RN/LPN:	Other:	
Position:	Unit:		
Member:	RN/LPN:	Other:	
Position:	Unit:		
Member:	RN/LPN:	_ Other:	
Position:	Unit:		

### APPENDIX 8 WALTER REED ARMY MEDICAL CENTER NURSING PEER REVIEW COMMITTEE

### Confidentiality Guidelines for Participants

### Disclosure Restrictions:

- 1. A member, agent or employee of the Nursing Peer Review Committee or a participant in any peer review proceedings may not voluntarily disclose any communication to the Committee or any record or proceeding of the Committee. Nor may they be required to disclose such information.
- 2. Any person who attends any proceeding of the Committee may not voluntarily disclose any information acquired or disclose any opinion, recommendation, or evaluation of the Committee or any member of the Committee. Nor may they be required to disclose this information.
- 3. Members of the Committee and participants may not be questioned about their testimony or about opinions formed as a result of the Committee proceedings.
- 4. Peer review committees are required to protect, to the extent possible, the identity of patients.

#### Recommendations:

- 1. You should not discuss any case except as part of your official responsibilities on the Committee. Casual or "cocktail" conversation about a case is one of the easiest ways to breech confidentiality. Discussing a case with a third party or expert to get their opinion or feeling can also result in inadvertently disclosure of confidential information. You never know when some seemingly unimportant information will permit the third party to identify the person or event of which you are speaking.
- 2. If you are questioned about a case or your participation in a proceeding, you should respond that the nursing policy does not permit you to respond to any questions. You should also immediately notify the chair of the Committee of the incident.
- 3. You should not identify patients by name. You refer to individual patients only if the chair of the Committee has been consulted.
- 4. All questions about confidentiality should be directed to the Committee chair.

I have read these guidelines, understand and agree to abide by them.

Signature:		